

beaven01.002

*BE*  
*BFW*

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**  
(beaven01.002)

**Applicant:** Douglas F. Beaven, et al.      **Paper No.:**  
**Application No:** 10/765,424      **Group Art Unit:** 3623  
**Filed:** 1/27/04      **Examiner:**

**Title:** *System for performing collaborative tasks*

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Commissioner for Patents  
Alexandria, VA 22313-1450

**Petition to make special under 37 C.F.R. 1.102(c)**

Dear Sir:

37 C.F.R. 1.102(c) and MPEP 708.02, section IV, provide that an application may be made special where an applicant is 65 years or more of age by submitting a Verified Statement by the applicant of his age. In the attached Verified Statement, the Applicant of the above patent application declares that he was born on 4/17/39 and is consequently presently 66 years of age.

Having provided the required Verified Statement, Applicant respectfully requests that the Commissioner grant the petition, as provided by 37 C.F.R. 1.102(c) and MPEP 708.02, section IV.

Respectfully submitted,

*Gordon E Nelson*

Attorney of record,  
Gordon E. Nelson  
57 Central St., P.O. Box 782  
Rowley, MA, 01969,  
Registration number 30,093

*9/28/05*  
Date



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(beaven01.002)

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Commissioner for Patents  
Alexandria, VA 22313-1450

**Verified Statement of Applicant's Age under 37 C.F.R. 1.102(c)**

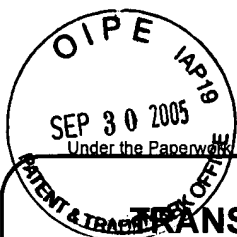
I, Douglas F. Beaven, am one of the inventors of the above patent application. In connection with a *Petition to make special* being filed in the above patent application, I declare that of my own knowledge, I was born on 4/17/39 and am presently 66 years old.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Respectfully submitted,

  
\_\_\_\_\_  
Douglas F. Beaven

\_\_\_\_\_  
Date 9/27/05



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/765,424	
	Filing Date	1/27/2004	
	First Named Inventor	Douglas F. Beaven, et al.	
	Art Unit	3623	
	Examiner Name		
Total Number of Pages in This Submission	3	Attorney Docket Number	beaven01.002

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	return postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Gordon E. Nelson, Patent Attorney, PC		
Signature			
Printed name	Gordon E. Nelson		
Date	9/28/2005	Reg. No.	30,093

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Gordon E. Nelson	Date	9/28/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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